Industrial Insurance Chiropractic Advisory Committee (IICAC) Meeting Minutes

Date: April 16, 2009 from 9:30 to 11:30 a.m.



Final

Present: Robert Baker, DC

Clay Bartness, DC Roger Coleman, DC Linda DeGroot, DC

Michael Dowling, DC, Chair

Lissa Grannis, DC

Jay Lawhead, DC (by phone)

Bill Pratt, DC, Vice Chair

Ron Wilcox, DC
Bob Mootz, DC
Janet Blume
Carole Horrell
Reshma Kearney
La Vonda McCandless
Joanne McDaniel

Jason McGill

Absent: Guests: NA

General Business

3/19/09 IICAC minutes:

Moved, Seconded, Carried: Minutes were approved as written, with the correction of the next meeting date to read "4/16/09."

Director Judy Schurke

Director Schurke thanked the IICAC for their leading edge work creating practice aids and other reference materials that assure workers receive quality care. After informal discussions and information sharing, the IICAC thanked Director Schurke for taking time to meet with them in person during this busy legislative session.

IICAC Webpage

Bob Mootz, DC announced that L&I published the new IICAC webpage yesterday. At the May meeting, the IICAC will determine how to display members' contact information, for example by committee, individually, etc. Mike Dowling, DC, Chair, will dead this effort and provide a draft at the next meeting.

Meeting agendas need to be published online 30 days before meetings.

Office of the Medical Director (OMD) Updates

Jason McGill, JD, OMD Administrator and others are available to work on claims issues that arise. Carole Horrell, La Vonda McCandless, Janet Blume and Joanne McDaniel all maintain good working relationships with providers, claims, and others. L&I always works in partnership to develop better policies. Additionally, OMD collaborates with programs at the U of W, Harborview, and other entities to provide appropriate services to stalled care cases.

Legislation Update:

The department did not request any legislation this session. Other bills of interest:

1. Radiology and imaging bill creates a public and private payer committee at Health Care Authority (HCA) to develop guidelines on coverage by 7/1/09. How to implement these

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- guidelines will be determined by 9/1/09. (Bill will likely go to the Governor for signature within 30 days.
- 2. Universal Health Care bill was halted, but federal efforts continue.
- 3. <u>Billing Uniformity bill:</u> Looks at consistent application of communications with payers to decrease bill processing time and increase efficiencies. Private payers, DSHS, HCA, Dept. of Corrections, and L&I all support this bill.
- 4. <u>Health Care Technology bill</u>: An outcome of the federal stimulus package, L&I and HCA are developing proposals to help standardize electronic health records on a national basis. By 2014 standards are to be applied that will be used by everyone by 2020.
- 5. <u>Ex Parte bill</u>: For injured workers with an open claim or on appeal, providers will receive official notice that an attorney or claim manager wants to talk with them. It's not clear whether this will be passed by the legislature.
- 6. <u>Pay During Appeal bill</u> was passed last session. This year's new proposal would require payment of future benefits if a claim is allowed. It's not passing at this point.
- 7. Prescription Drug Program bill: It shouldn't affect L&I much, as it's directed at Medicaid.

<u>HCA Health Technology Assessment Program</u> over the past two years issued two decisions regarding criteria for lumbar fusions and artificial disc replacement. Both are high level visions without specific details.

Currently, L&I covers artificial disc replacement on a case by case basis. Intrathecal pumps are not covered.

The long term vision includes a network of clinics that involve patients as active participants in structured, intensive, multidisciplinary programs. The current focus is on Commission for the Accreditation of Rehabilitation Facilities (CARF) accredited pain programs.

Opioid Guidelines are being reviewed by L&I and other agencies to develop standards for prescribing and dosing.

Prescription Drugs:

L&I's preferred drug program is working well. By July, L&I will implement payment for asthma drugs.

Psychiatric ARNPs:

L&I will probably begin covering this service later this year. The rule is in the public comment process at this time.

Claims Update:

Carole Horrell reported that the Vocational Rule change two years ago allows workers to select not to receive vocational services from the department and obtain their own vocational services over the next five years. Workers are utilizing the available training funds; the first worker to complete such training graduated recently.

Due to the state's hiring cap, no new classes of claim manager apprentices have been added lately. However, there is less attrition, due to the poor economy. Training a claim manager takes 20 months, so there may be a shortage of trained staff two years from now.

Some claim managers worked overtime in March, so caseloads are back to manageable size.

Full IICAC Committee Meeting Schedule

Ron Wilcox, DC suggested changing full IICAC meetings to quarterly only. The other meeting months

would be devoted totally to subcommittee work. This change would allow the IICAC to plan the full committee agendas early enough for publication 30 days before the meeting.

At the May IICAC meeting, we'll discuss options, identify the months for quarterly meetings, etc.

PPQ Subcommittee Report:

Jay Lawhead, DC reported they are conducting preliminary shoulder literature research.

Look at the IICAC website to see the draft carpal tunnel syndrome practice aid and submit comments.

PEO Subcommittee:

Ron Wilcox, DC reported the team is working on the consultant education prerequisites that require policy changes.

Next Meeting:

The full IICAC meet reconvene on Thursday, May 21, 2009 at 8:30 a.m. for 30 minutes. Subcommittees will then meet for 2.5 hours.